

CAED 435 (Rev. 10/2023)		United States District Court, Eastern District of California		Case 2:21-cv-00073-JDP Document 120 Filed 01/25/24 Page 1 of 1		FOR COURT USE ONLY	
TRANSCRIPT ORDER						DUE DATE:	
PLEASE Read Instruction Page (attached):							
1. YOUR NAME Matthew Maclear		2. EMAIL mcm@atalawgroup.com		3. PHONE NUMBER 415-568-5200		4. DATE 1/25/2024	
5. MAILING ADDRESS 4030 Martin Luther King Jr. Way				6. CITY Oakland		7. STATE CA	
8. ZIP CODE 94609		9. CASE NUMBER 2:21-cv-00073-JDP		10. JUDGE Jeremy D. Peterson		DATES OF PROCEEDINGS	
				11. FROM 1/25/2024		12. TO 1/25/2024	
13. CASE NAME California Sportfishing Protection Alliance v. Pacific Bell Telephone Co.				LOCATION OF PROCEEDINGS			
				14. CITY		15. STATE	
16. ORDER FOR							
<input type="checkbox"/> APPEAL No.		<input type="checkbox"/> CRIMINAL		<input type="checkbox"/> CRIMINAL JUSTICE ACT		<input type="checkbox"/> BANKRUPTCY	
<input type="checkbox"/> NON-APPEAL		<input checked="" type="checkbox"/> CIVIL		<input type="checkbox"/> IN FORMA PAUPERIS		<input type="checkbox"/> OTHER (Specify)	
17. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested) You must provide the name of the Reporter.							
TRIAL		DATE(S)		REPORTER		HEARINGS	
<input type="checkbox"/> ENTIRE TRIAL						<input checked="" type="checkbox"/> OTHER (Specify Below)	
<input type="checkbox"/> JURY SELECTION						Motion Hearing	
<input type="checkbox"/> OPENING STATEMENTS						1/25/2024	
<input type="checkbox"/> CLOSING ARGUMENTS						Jenny Wood, ECRO	
<input type="checkbox"/> JURY INSTRUCTIONS							
18. ORDER (Grey Area for Court Reporter Use)							
CATEGORY	ORIGINAL (Includes Certified Copy to Clerk for Records of the Court)	FIRST COPY	ADDITIONAL COPIES	NO. OF PAGES ESTIMATE		COSTS	
30-Day	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES				
14-Day	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES				
7-Day	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES				
3-Day	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NO. OF COPIES				
Next Day	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES				
2- HOUR	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES				
REALTIME	<input type="checkbox"/>	<input type="checkbox"/>					
CERTIFICATION (19 & 20) By signing below, I certify I will pay all charges (deposit plus additional).				ESTIMATE TOTAL			
19. SIGNATURE /s/ Matthew Maclear				PROCESSED BY			
20. DATE 1/25/2024				PHONE NUMBER			
TRANSCRIPT TO BE PREPARED BY				COURT ADDRESS			
ORDER RECEIVED		DATE	BY				
DEPOSIT PAID				DEPOSIT PAID			
TRANSCRIPT ORDERED				TOTAL CHARGES			
TRANSCRIPT RECEIVED				LESS DEPOSIT			
ORDERING PARTY NOTIFIED TO PICK UP TRANSCRIPT				TOTAL REFUNDED			
PARTY RECEIVED TRANSCRIPT				TOTAL DUE			